TENNESSEE DEPARTMENT OF AGRICULTURE EQUINE INTERSTATE MOVEMENT PERMIT PROGRAM APPLICATION FORM

Information

Owner Name:			Veterinarian Name:	
Address:			Address:	
City, State, Zip:			City, State, Zip:	
Phone:			Phone:	
Certificate of Veterinary	Inspection N	umber:	Date Issue	ed:
Premises identification number where horse is housed:				
EIA Information:				
Result:	ult: Lab. Accession number:		Lab. Performing Test:	Date of test:
Horse Name:	Breed:	Sex:	Color:	Age:
Identification Method: (Acceptable identification methods: unique identifier lip tattoo, brand, electronic implant, or digital photograph. Digital photographs must include views of the entire left and right sides and a front view) In making application for an Equine Event Permit, I have attached an original Certificate of Veterinary Inspection and an original VS Form 10-11 (EIA test form). I understand that this permit is issued by the state of Tennessee and that all travel requires an original VS Form 10-11, a complete travel itinerary listing all events and transport occurring during the passport's active status, and that the permit must accompany the horse at all times. Violators of any requirement of the passport program are subject to the laws of the state where the violation occurs and may range from immediate return to the state of origin to revocation of the permit with civil penalties or criminal prosecution. I also understand that entry requirements can vary from state to state subject to the disease status of participating states, and the owner/transporter is responsible for compliance with entry regulations at the time of movement.				
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